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Attorney General’s Office

Male’, Republic of Maldives.

**Scholarship Application Form**

**You should submit the following items with this application form in sealed envelope.**

1. **Attested** original of all qualifications.
2. **Accredited** original/copy of Bachelor’s Degree certificate (if submitting a copy of the accredited certificate, the copy must be attested).
3. **Attested** original of transcripts ofBachelor’s Degree. (Full transcript) (if exemptions were given for any course module/modules please provide transcripts of the previous courses from which exemptions were given) if any.
4. Curriculum Vitae (CV)
5. 01 pp size photo
6. ID Card Copy

**(WRITE CLEARLY IN BLOCK LETTERS)**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***1. Personal*** | | | | | | | | | | | |
| Name |  | | | | | | | | Sex | M  F |  |
| Permanent Address  (including Atoll/Island) | |  | | | | | | | | |  |
| Current Address | |  | | | | | Tel | |  | | *(recent PP photo)* |
| Date of Birth (D/M/Y) | |  | | | | | Age | | years | |  |
| E-mail | | |  | ID No. |  | | | | | |  |
| Marital Status | SINGLE  MARRIED DIVORCED | | | Number of  Children |  | Their ages | |  | | |  |

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| ***2. Employment*** | | | | |
|  | Date Emp. | Post | Office | Tel |
| Present  Employment |  |  |  |  |
| First Empl.  in Gov’t |  |  |  | |

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| ***3. Educational Qualification*** | | | | | | | | | |
| **Tick (✓)all Qualification Attained** | | | | | | | | | |
| O’ Level Shahadha Saanaviyya Degree PhD  A’ Level Diploma Masters others please specify: ……………………………. | | | | | | | | | |
| **Tertiary & Higher education** | | | | | | | | | |
| **Institute / Country** | | **Attainment (Certificate/Diploma/Degree received)** | | | | **From** | **To** | | **Funding Scheme** |
|  | |  | | | |  |  | |  |
|  | |  | | | |  |  | |  |
| **Higher Education or training currently being undertaken** | | | | | | | | | |
| **Institute** | | | **Programme** | **Level** | | **Duration**  **Date started/End** | | | **Funding Scheme** |
|  | | |  |  | |  | | |  |
| ***4. Desired Course*** | | | | | | | | | |
| Course name |  | | | | Level | | |  | |
| Allocated Office |  | | | | Country of Study | | |  | |
| Advertisement / Notice ref.  & date |  | | | | Scheme | | |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***5. Em*** | ***p*** | ***loyment History*** | | | |
| **Post & Office** | | | **From** | **To** | **Field of work** |
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| ***6. Service Bond Records*** | | | | |
| **Nature of Bond**  **(studies / training course / paid leave)** | **Bond**  **Duration** | **Date Began**  **Service** | **Date of Bond**  **Completion** | **Status**  **(completed / deferred / serving)** |
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| ***7. Other Applications to Scholarships in* 2021, 2022** | | | | | |
| **Course (including level)** | **Office** | **Country** | **Funding**  **Scheme** | **Date**  **Applied** | **Status: (selected\*\***  **pending / rejected)** |
|  |  |  |  |  |  |
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*\* \* A p p l i c a n t w i l l b e d i s q u a l i f i e d i f i n f o r m a t i o n i s w i t h h e l d .*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***8. Parent / Guardian / Spouse*** | | | | |
| Name & Address of | Responsible Parent *OR* Guardian *OR* Spouse |  | | |
|  | Tel |  |

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| --- | --- |
| ***9. Applicant’s Declaration*** | |
| I ................................................ certify that to the best of my knowledge, all information provided in this application is accurate and complete. I understand that false, misleading, incomplete or omitted information could **lead to the invalidation** of my application. If my application is accepted, I undertake to abide by the regulations of the Government. Furthermore, rejection of the course after selection (without any valid reason) could **black list** me with the condition that I may not get any chance to receive a government scholarship for a certain period by the Department of Higher Education. | |
| Signature of the Applicant: | Date: |

*Please submit the completed form, with supporting documents, in a sealed envelope addressed to:*

***Attorney General’ Office Velaanaage (6th Floor)***

***Deadline for submission: 30th March 2023***

***Our Telephone number is: 3010100 / 3010101***

* ***Please double check if your application is complete. Are the following documents included?***

|  |  |  |
| --- | --- | --- |
| Attested original of all qualifications stated in paragraph 3……………..................………………… | Yes | No |
| Attested original of transcripts ofBachelor’s Degree. ……………..................……………………………. | Yes | No |
| Accredited Bachelor’s Degree Certificate………............………………………………………………….. | Yes | No |
| Curriculum Vitae (CV)..................................................................................................................... | Yes | No |
| 01 pp size photo………………………………………………………………………........................................ | Yes | No |
| ID card copy…………………………………………………………………………………………………. | Yes | No |
|  |  |  |
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|  |  |  |
| ***NOTE 1****: You should enclose the application and other documents in a sealed envelope with your* ***Name, Address and Applied Category & Course*** *clearly written on the envelope.*  ***NOTE 2****: Please ensure you obtain a receipt on handover of the documents and note the reference number on the receipt.* | | |